

#### Ministry of Long-Term Care

Long-Term Care Operations Division Long-Term Care Inspections Branch

#### **London District**

130 Dufferin Avenue, 4th Floor London, ON, N6A 5R2 Telephone: (800) 663-3775

## Original Public Report

Report Issue Date: November 8, 2024

Inspection Number: 2024-1181-0004

Inspection Type:

Complaint

Critical Incident

Licensee: Revera Long Term Care Inc.

Long Term Care Home and City: Brierwood Gardens, Brantford

### **INSPECTION SUMMARY**

The inspection occurred onsite on the following dates: November 4-6, 2024

The following intakes were inspected:

- Intake #00128946 complaint related to housekeeping, laundry, and maintenance services
- Intake: #00128945 complaint related to housekeeping, laundry, and maintenance services
- Intake: #00129209 / Critical Incident (CI) #2678-000037-24 related to housekeeping, laundry, and maintenance services

The following intakes were completed in this inspection: Intake #00125174, CI #2678-000033-24 and Intake #00129966, CI #2678-000038-24 were related to infection prevention and control.

The following Inspection Protocols were used during this inspection:

Housekeeping, Laundry and Maintenance Services Infection Prevention and Control



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### **INSPECTION RESULTS**

#### **Non-Compliance Remedied**

**Non-compliance** was found during this inspection and was **remedied** by the licensee prior to the conclusion of the inspection. The inspector was satisfied that the non-compliance met the intent of section 154 (2) and requires no further action.

NC #001 remedied pursuant to FLTCA, 2021, s. 154 (2)

#### Non-compliance with: O. Reg. 246/22, s. 93 (2) (a) (i)

Housekeeping

s. 93 (2) As part of the organized program of housekeeping under clause 19 (1) (a) of the Act, the licensee shall ensure that procedures are developed and implemented for,

(a) cleaning of the home, including,

(i) resident bedrooms, including floors, carpets, furnishings, privacy curtains, contact surfaces and wall surfaces, and

The licensee failed to ensure that the procedures were implemented for cleaning of the home, including resident bedrooms.

#### **Rationale and Summary**

A resident room was observed to have dirt, debris, and pills on the floor. During interviews, a staff member confirmed the floor was not cleaned and another staff member confirmed the floor was not clean and discarded the pills on the floor. The following day, the resident room was observed to be swept clean and free of dirt and debris.

As the resident room was unoccupied, residents were minimally effected by the



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cleanliness of the room.

#### Sources

Observations made in the resident room, interview with staff members

Date Remedy Implemented: November 5, 2024

### WRITTEN NOTIFICATION: Housekeeping, Laundry and Maintenance Services

NC #002 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

#### Non-compliance with: O. Reg. 246/22, s. 93 (2) (a) (i)

Housekeeping

s. 93 (2) As part of the organized program of housekeeping under clause 19 (1) (a) of the Act, the licensee shall ensure that procedures are developed and implemented for,

(a) cleaning of the home, including,

(i) resident bedrooms, including floors, carpets, furnishings, privacy curtains, contact surfaces and wall surfaces, and

The licensee has failed to ensure the implementation of procedures for the cleaning of resident room floors.

During an initial walk through in the home, inspector observed a room in which the floors had a build up a dust, dirt and grime, most notably around door frames, the hallway threshold, under the resident's bed and at the room corners. During interview, a staff member confirmed the floor of the room was not clean after they had cleaned the room. During interviews another staff member also confirmed the floors in the room were not clean.

While walking with a staff member, inspector observed a build up of dust, dirt and



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grime, as well as visible cobwebs at base of the door to another resident room. During an interview, the staff member confirmed the floor of the room was not clean.

When staff did not fully implement the procedures to ensure the rooms were kept clean and tidy, there was a risk to the residents' health and wellbeing.

Sources: observation of resident rooms, interviews with staff

### WRITTEN NOTIFICATION: Infection Prevention and Control

NC #003 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

#### Non-compliance with: O. Reg. 246/22, s. 102 (9) (a)

Infection prevention and control program

s. 102 (9) The licensee shall ensure that on every shift,

(a) symptoms indicating the presence of infection in residents are monitored in accordance with any standard or protocol issued by the Director under subsection (2); and

The licensee has failed to ensure that a resident was assessed and/or monitored for symptoms indicating the presence of infection for a specified period of time.

A Critical Incident System report (CIS) was received regarding a disease outbreak. During an inspection, the inspector reviewed the line listing for the outbreak and progress notes for select residents on the line list. Progress notes for a resident identified for a specified period of time that symptoms indicating the presence of infection were not monitored.

During an interview with staff, they verified documentation was not present for the specified period, indicating the resident was not assessed and/or monitored for



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symptoms indicating the presence of infection. When staff did not assess the resident for symptoms indicating the presence of infection while the resident was known to have an infection, the resident was placed at increased risk for deteriorated health status and delay of care and treatment.

Sources: interview with staff, review of line listing, and progress notes



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